



## Specialty Tier Reform Update – Week of January 5, 2015

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### STATES

#### Connecticut

##### ***Insurance chair seeks to limit how specialty drug tiers can be used***

Senator Joseph Crisco (D), the chair of the Joint Insurance and Real Estate Committee, filed a flurry of health insurance bills this week at the outset of the 2015 legislative session, all of which will be heard by his committee. They include a measure (S.B. 24) that would prohibit health insurers from creating drug formularies that place a prescription drug in a non-preferred or higher cost-sharing tier unless at least one therapeutically equivalent drug is available in a preferred or lower cost-sharing tier. Insurers also could not make mid-year changes to their drug formularies and must provide consumers with information to more easily compare health plan options.

#### Kentucky

##### ***Bills limiting specialty tier coinsurance are introduced in both chambers***

Senator Tom Buford (R) introduced companion legislation this week to House measures (H.B. 99, H.B. 146) that would limit copayments or coinsurance for drugs subject to a tiered formulary to no more than \$100 per month for up to a 30-day supply or \$200 per month in the aggregate. All of the measures would allow subscribers to request an exception to the tiered cost-sharing structure and prohibit them from placing all drugs of the same class within a specialty tier (see Specialty Tier Reform Update for Week of December 15<sup>th</sup>). The latter is a practice that has been discouraged by the federal Centers for Medicare and Medicaid Services in response to civil rights complaints filed by consumer advocates.